

Department of Engineering & Inspections 25 East Main Street

<b>Permit Number:</b>	

P.O. Box 869 Salem, VA 24153 Phone: 540-375-3036 Fax: 540-375-4042		NEW CONSTRUCTION/ADDITIONS		
		New Building Area: Sc	ą. Feet	
PHONE	. 340-373-3030 Fax. 340-373-4042	No. of Stories:		
		No. of Units:		
COMMERCIAL PE	ERMIT APPLICATION			
Date of Application:  TYPE OF WORK (circle one)		If water or sewer laterals are needed, contact Utility Collections at (540) 375-3021		
				New Construction
Addition	Demolition	Floodway Zone AE	-	
CATEG	ORY OF CONSTRUCTION	X (500 yr) None	. , ,	
Building Primary Use:		ASBESTOS		
Building Secondary Use:		Was structure built prior to languary 1 16	W	
Accessory Structure: (des	cribe)	Was structure built prior to January 1, 1985? Y N		
Other: (describe)		If Yes, Asbestos Survey Must Be S	Submitted	
SCOPE OF W	ORK (describe briefly, but thoroughly)	ZONING		
		Zoning District:		
		Site Plan/Survey Compliant: YES	NO NO	
		Setbacks: Front: Rear: Righ	t: Left:	
		Height: Approval:		
	JOB SITE IN	FORMATION		
Job Address:				
City/State/Zip:				
Development Name:				
Tax Map/Parcel #:				
Existing Use:		Proposed Use:		
Lot #:	Block #:	Section #:		
	OWNER IN	FORMATION		
Name:				
Mailing Address:				
City/State/Zip:				
Phone #: ( )	Cell: ( )	E-mail:		
	CONTRACTOR	INFORMATION		
Contractor Name:				
Address:				
City/State/Zip:				
Phone #: ( )		Cell: ( )		
State License #:		E-mail:		
Expiration Date:		City License #		
	APPLICANT INFORMATION	(if other than the owner or contractor)		
Applicant Name:				
Letter From Owner Giving Permission To Pull Permit:		YES NO		
Address:				
City/State/Zip:				
Phone #: ( )		Fax: ( )		
Cell: ( )		E-mail:		

ALTERATIONS/DEMOLITIONS		
Permit fees are based on the value of work performed including equipment, labor overhead and profit.	Remarks:	
Total Estimated Cost: \$		
TRADE PERMITS INVOLVED (circle)		
Each Trade Will Need Individual Permits		
Electrical Plumbing LP GAS		
Mechanical Sign Cross-Connection		
Fire Safety: Sprinkler Alarm Hood		
Permit fees are based on the value of work performed including equipment, labor overhead and profit.		
Estimate Cost Breakdown		
Building \$		
Electrical \$		
Plumbing \$		
Mechanical \$		
Fire: Alarm \$		
Sprinkler \$		
Hood \$		
Cross Connection \$		
LP Gas \$		
Sign \$		
TOTAL: \$		
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CERTIFICATIO	ON	
I understand that this permit will become null and void if work or construction a		
construction or work is suspended or abandoned for a period of 6 months at an		
obtaining this permit, it may be necessary for certain City of Salem Officials to v tax assessments, etc.	isit my property in conjunction with required inspections,	
I understand that all work is to conform to the current edition of the Virginia Ur	niform Statewide Ruilding Code	
I further understand that all permit holders shall call for all required inspections		
inspection type, as well as the permit number or the inspection may be rejecte		
I hereby certify that I am the owner of record of the herein described property,	or that the proposed work has been authorized by the	
owner of record and that I have been authorized to make this application as a designated agent. I agree to conform to all applicable		
state and local regulations, rules and policies and such shall be deemed a condition entering into the exercise of the permit. In addition,		
if a permit is issued, I certify that the code official or his authorized representative shall have the authority to enter the area(s) described		
herein at any reasonable hour for the purpose of enforcing the provisions of the		
APPLICANT: DA		
OWNERS AFFIDAVIT: (Complete if Owner	er is Not a Licensed Contractor)	
I affirm that I am the owner of the property described in this application and the		
of the Code of Virginia, as amended, and I am not subject to licensure as a contractor or subcontractor. I am also aware that it is a		
violation of State Law to hire or award a contract to an unlicensed contractor.		
SIGNED: (Must be Notarized if Owner is Not Present in Person)		
Subscribed and sworn before me in the of of	· · · · · · · · · · · · · · · · · · ·	
My commission expires Notary Public		